

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Markus Franciscus Antonius EURLINGS, and  
Noud Jan GILISSEN

Application No.:	TO BE ASSIGNED	Confirmation No:	
Filed:	October 8, 2003	Group No.:	
		Examiner	
For:	LITHOGRAPHIC APPARATUS, DEVICE MANUFACTURING METHOD AND DEVICE MANUFACTURED THEREBY, CONTROL SYSTEM		

**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

**INFORMATION DISCLOSURE STATEMENT**


Hon. Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Attached is Form PTO-1449 listing all of the documents cited by Applicants and the PTO in the parent application No. 10/157,033 relied upon under 35 USC §120. Pursuant to Rule 98(d), copies of these documents are not required now.

Please consider these documents and advise that they have been considered in this new application as by returning a copy of the enclosed Form PTO-1449 with the Examiner's initials in the left column per MPEP 609.

Respectfully submitted,  
PILLSBURY WINTHROP LLP

  
\_\_\_\_\_  
John P. Darling  
Reg. No. 44,482  
Tel: (703) 905-2045  
Fax: (703) 905-2500

P.O. BOX 10500  
McLean, VA 22102  
Tel. (703) 905.2000

Atty.  
Dkt. No.

M#

Client Ref.

303617

P-0260-020-US

# **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

Applicant: EURLINGS et al.

Application No.: TO BE ASSIGNED

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Date: October 8, 2003

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Examiner:

Group Art Unit:

## **U.S. PATENT DOCUMENTS**

Examiner's Initials*		Document Number	Date MM/YYYY	Name (Family Name of First Inventor)	Class	Sub Class	Filing Date (if appropriate)
	AR	6,193,393	02/2001	DOVE et al.	362	251	
	BR						
	CR						
	DR						
	ER						
	FR						
	GR						
	HR						
	IR						
	JR						
	KR						
	LR						
	MR						
	NR						

## **FOREIGN PATENT DOCUMENTS**

		Document Number	Date MM/YYYY	Country	Inventor Name	English Abstract		Translation Readily Available	
						Enclosed	No	Enclose	No
	OR	6-291023	10/1994	JAPAN	SASANO				
	PR	8-313842	11/1996	JAPAN	IWASAKI				
	QR	9-298154	11/1997	JAPAN	SHIRAISHI				
	RR	11-3849	01/1999	JAPAN	KOIKE				
	SR	0 744 641 A2	11/1996	EUROPE	STANTON				
	TR	0 486 316 A2	05/1995	EUROPE	SHIRAISHI				
	UR								
	VR								
	WR								
	XR								

## **OTHER (Including in this order Author, Title, Periodical Name, Date, Pertinent Pages, etc.)**

	YR								
	ZR								
	AAR								
	BBR								
	CCR								
	DDR								

Examiner

Date Considered:

\*EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP § 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.